

## Ak-Chin Indian Community Grant Application Cover Sheet

Name of City/Town/County/Non-Profit: Boys & Girls Clubs of the Casa Grande Valley	
Mayor/Supervisor/Chairman/President: Matthew Lemberg	
Contact Person and Title: Matthew Lemberg, Executive Director	
Applicant Address (administrative office): 1905 North Peart Road	
City: Casa Grande	Zip Code: 85122
Applicant Mailing Address (if different):	
City: Casa Grande	Zip Code: 85130
Phone Number: 520-876-5437	Fax Number: N/A
E-mail Address: <a href="mailto:mlemberg@cgtkids.org">mlemberg@cgtkids.org</a>	
If Non-Profit, Name of City/Town/County With Which You Will Associate: City of Maricopa	
Contact Person: Cassandra Brown	
City/Town/County Mailing Address: 39700 West Civic Center Plaza	
City: Maricopa	Zip Code: 85138
Phone Number: 520-316-6923	Fax Number: N/A
E-mail Address: <a href="mailto:cassandra.brown@maricopa-az.gov">cassandra.brown@maricopa-az.gov</a>	

Program or Project Name: Opening a Boys & Girls Club in Maricopa	
Purpose (Check all that apply) <input checked="" type="checkbox"/> <b>education</b> <input type="checkbox"/> public safety <input type="checkbox"/> health <input type="checkbox"/> environment <input type="checkbox"/> promotion of commerce <input type="checkbox"/> economic and community development	
Purpose of Grant (brief statement): The Boys & Girls Clubs of the Casa Grande Valley is working with the City of Maricopa, the Maricopa Unified School District and numerous community partners to open a Club in Maricopa. This Club would provide young people in Maricopa (and the surrounding areas) a safe, fun and educational place to go when they are not in school by offering an after-school program during the school year and day programs during school breaks.	
Beginning and Ending Date of Program or Project: July, 2020 – June, 2021	
Amount Requested: \$100,000	Total Cost: \$250,000
Geographic Area Served: Maricopa (and surrounding areas)	

By the execution of this Grant Application the undersigned agrees that the information contained in this Application is true, to the best of the Applicant's knowledge. The Applicant shall notify the Community if any information in this Application changes

Signature:

For the Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Typed/Printed Name and Title: Matthew Lemberg, Executive Director

For the City/Town County: \_\_\_\_\_ Date: \_\_\_\_\_  
(If different than applicant)

Typed/Printed Name and Title: \_\_\_\_\_